

CITY OF ADRIAN
CONSTRUCTION CODE SERVICES
135 E. MAUMEE STREET - ADRIAN, MICHIGAN 49221
Ph 517.264.4814 - Fax 517.264.8016
Download permits at www.ci.adrian.mi.us

Requirements for Obtaining Permits From the City of Adrian

Residential Structures

(One and Two- Family Residential with less than 3,500 square feet of calculated floor area)

- Building Permit Application
- Minimum of two (2) sets of plans that include the following
 - Foundation and floor plans.
 - Roof and wall section.
 - Building elevations.
 - Site Plan.

Commercial Structures

(Including One and Two-Family Residential with more than 3,500 square feet of calculated floor area)

- Building Permit Application
- Copy of plan review approval letter. Plan review must be approved prior to a building permit being issued.

Mobile and Premanufactured Homes

- Building Permit Application
- Minimum of two (2) sets of plans for the foundation and the method of anchoring the unit to the foundation.
- Site Plan
- For Michigan approved premanufactured units; one (1) copy of the Building System Approval and the approved plans.

Instructions for Completing Application

Page 1 of the application: Complete all applicable sections. Note section II. If the homeowner is doing the construction, enter "Homeowner" in the contractor's information space.

Page 2 of the application: Enter the information as required.

Page 3, Section VI of the application: Must be completed by the permit applicant and **signed**.

Section VII. Must be completed by the local governmental agency (city/township) for zoning (environmental) approval. In certain jurisdictions, and land use permit may be substituted. Note (g) and (h). Indicate whether a well or septic approval is required. Well and septic permits are typically issued by the county health department.

Schools: It is the responsibility of schools to submit for environmental control approvals as required by law, when applicable.

Building Permit Fees

Building permit fees may be obtained from the City of Adrian, Building/Inspection Department, Construction Code Services.

You will need to furnish the following information when calling

- Total square footage of the structure.
- Use group (i.e., "R-3 use group for single family homes, "U" use group for detached garages, pole barns, etc.).
- Type of construction ("5B" for wood frame construction).

If you submit your building permit application and plans without money, your application will be put on hold and you will receive an invoice for the building permit fee.

Please Note: Work may not proceed until the permit has been issued. This application is not your authority to proceed with any work and work commenced prior to the issuance of a permit may be subject to civil infraction penalties and fines.

All applications are reviewed and approved by the Building Inspector prior to a permit being issued. Expect this process to take **5-10 working days**, but it could be longer depending on Building Inspector's current workload.

When to Call for an Inspection

Please call the Building/Inspection Department number listed on your building permit at least **One (1)** days prior to the time you need an inspection. A minimum of four (4) inspections are required on most structures. **It is the permit holder's responsibility to call for inspection, prior to the construction being covered.**

Expiration of Permit

A permit remains valid as long as work is progressing and inspections are requested and conducted. A permit shall become invalid if the authorized work is not commenced within 180 days after issuance of the permit or if the authorized work is suspended or abandoned for a period of 180 days after the time of commencing the work. **A PERMIT WILL BE CLOSED WHEN NO INSPECTIONS ARE REQUESTED AND CONDUCT WITHIN 180 DAYS OF THE DATE OF ISSUANCE OR THE DATE OF A PVIOUS INSPECTION. CLOSED PERMITS CANNOT BE REFUNED. THE CHARGE TO RE-OPEN A CLOSED PERMIT IS \$75.00.**

Foundation Inspection

Footing Inspection- Prior to placing concrete in piers, trenches and framework.

Backfill Inspection- Prior to backfill and after the footing, walls, waterproofing, and drain tile are installed.

Rough Inspection

The rough inspection is to be make after the roof, all framing, firestopping, bracing, electrical, mechanical, and plumbing rough installations are in place, and before the insulation is installed.

Final Inspection

The final inspection is to be made upon completion of the building or structure, and before occupancy occurs.

Certificate of Occupancy

A new building or a building that is altered shall not be used or occupied until a Certificate of Occupancy is issued by the code official. The permit holder or their authorized agent must request a Certificate of Occupancy upon the completion of the project. This request may be verbal, however, it is recommended that a written request be sent in, which included the building, electrical, mechanical, plumbing, boiler and elevator permit number, the plan review submission number, and the Bureau of Fire Services project number (for Schools only). A Certificate of Occupancy cannot be issued until all fees are paid, permits are finalized and the work covered by a building permit has been completed in accordance with the permit, the code, and other applicable laws and ordinances. If an electrical, mechanical, plumbing, boiler or elevator permit, plan review submission for Fire Services project is not required, write "not applicable" on the request form in the appropriate space.

BUILDING PERMIT APPLICATION

City of Adrian
Construction Code Services
135 East Maumee Street
Adrian, Mi 49221

Ph. 517-264-4814 – Fax 517-264-8016
Download applications at www.ci.adrian.mi.us

Paid _____
Permit No. _____
OFFICE USE ONLY

I. PROJECT INFORMATION			
Project Address:		Name of Project:	
II. OWNER OR LEASSEE			
Name:		Daytime / Cell Phone (MUST HAVE)	
Owner's Address:		Home Phone:	
ARCHITECT OR ENGINEER			
Contact Name		Company	
City	State	Zip	Telephone Number
License Number		Expiration Date	
CONTRACTOR			
Company		Office Phone:	
On Site Manager		Daytime / Cell Phone:	
Contractor Address:			
Builders License Number		Expiration Date	<input type="checkbox"/> Not Licensed
**Please attach copy of Michigan Builder's License if not already on file.			
<input type="checkbox"/> General Contractor		<input type="checkbox"/> Sub-Contractor	
Federal Employer ID Number or Reason for Exemption:			
Worker's Comp Insurance Carrier or Reason for Exemption:			
MESC Employer Number or Reason for Exemption:			
III. TYPE OF IMPROVEMENT AND/OR PLAN REVIEW			
A. Type of Improvement (check all that apply)			
<input type="checkbox"/> New Construction	<input type="checkbox"/> New Addition	<input type="checkbox"/> Alteration	<input type="checkbox"/> Repair Only
<input type="checkbox"/> Deck <input type="checkbox"/> Ramp	<input type="checkbox"/> Porch <input type="checkbox"/> Roof	<input type="checkbox"/> Garage	<input type="checkbox"/> Carport
<input type="checkbox"/> Manufactured	<input type="checkbox"/> Mobile Home	<input type="checkbox"/> Foundation Only	<input type="checkbox"/> Relocation
<input type="checkbox"/> Demolition / Have Utility Companies been contacted?			<input type="checkbox"/> In-Ground Pool
			<input type="checkbox"/> Above-Ground Pool
		Date Contacted:	
B. Plan Review(s) to be performed for this project?			
<input type="checkbox"/> Building	<input type="checkbox"/> Electrical	<input type="checkbox"/> Mechanical	<input type="checkbox"/> Plumbing
		<input type="checkbox"/> Fire Suppression	<input type="checkbox"/> Foundation
Please Note: Separate Permit Applications and Plan Reviews must be completed and separate fees are charged for plumbing, mechanical & electrical work. Please refer to perspective applications for guidelines and fees.			
Applicant to Complete All Items in Section I, II, III, IV, V and VI			
Note: Separate Applications Must be completed for Plumbing, Mechanical and Electrical Work Permits			

IV. PROPOSED USE OF BUILDING

A. Residential

<input type="checkbox"/> 1. One-Family	<input type="checkbox"/> 3. Hotel, Motel Number of Units _____	<input type="checkbox"/> 5. Detached Garage
<input type="checkbox"/> 2. Two or more Family Number of Units _____	<input type="checkbox"/> 4. Attached Garage	<input type="checkbox"/> 6. Other

B. Non-Residential

<input type="checkbox"/> 7. Amusement	<input type="checkbox"/> 11. Service Station	<input type="checkbox"/> 15. School, Library, Educational
<input type="checkbox"/> 8. Church Religion	<input type="checkbox"/> 12. Hospital, Institutional	<input type="checkbox"/> 16. Store, Mercantile
<input type="checkbox"/> 9. Industrial	<input type="checkbox"/> 13. Office, Bank, Professional	<input type="checkbox"/> 17. Tanks, Towers
<input type="checkbox"/> 10. Parking Garage	<input type="checkbox"/> 14. Public Utility	<input type="checkbox"/> 18. Other

Non-Residential – Describe in detail proposed use of building. Such as: food processing plant, machine shop, laundry building at hospital, elementary school, secondary school, college, parochial school, parking garage for department store, rental office building, office building at industrial plant. If use of existing building is being changed, enter proposed use.

Description of Work

V. SELECTED CHARACTERISTICS OF BUILDING

A. Principal Type of Frame (Please Circle)

1. Masonry, Wall Bearing	2. Wood Frame	3. Structural Steel	4. Reinforced Concrete	5. Other
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B. Principal Type of Heating Fuel (Please Circle)

6. Gas	7. Oil	8. Electricity	9. Coal	10. Other
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C. Type of Sewage Disposal (Please Circle)

11. Public or Private Company	12. Septic System
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D. Type of Water Supply (Please Circle)

12. Public or Private Company	14. Private Well or Cistern
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E. Type of Mechanical (Please Circle)

15. Will there be Air Conditioning? Yes No	16. Will there be Fire Suppression? Yes No
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F. Dimensions / Data

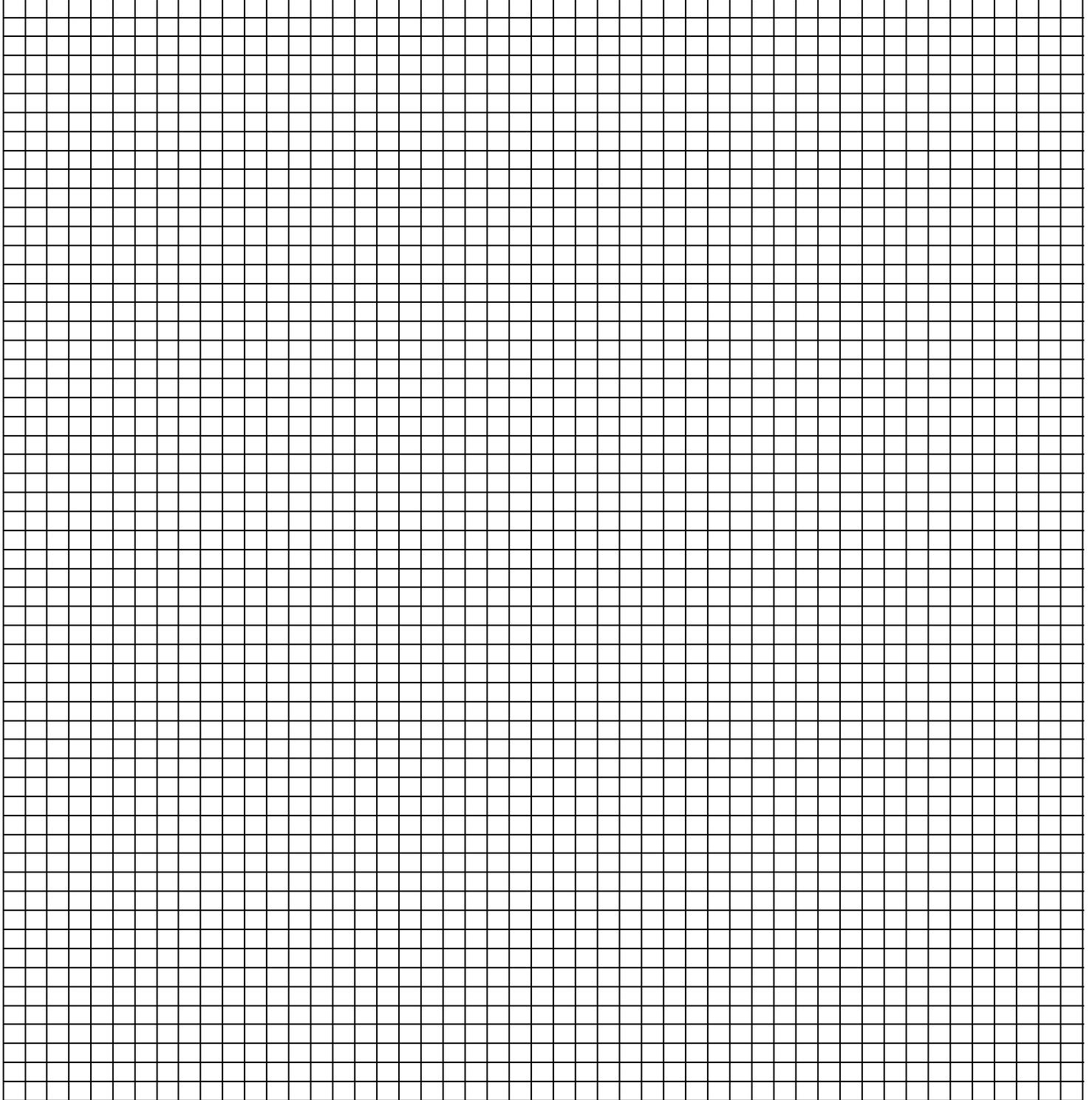
		<u>Existing</u>	<u>Alterations</u>	<u>New</u>
17. Number of Stories _____	21. Floor Area Basement	_____	_____	_____
18. Use Group _____	First & Second Floor	_____	_____	_____
19. Construction Type _____	Third – Tenth Floor	_____	_____	_____
20. No. of Occupants _____	Eleventh – Above	_____	_____	_____
	Total Area	_____	_____	_____

G. Number of Off-Street Parking Spaces

22. Enclosed	23. Outdoors
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VI. Applicant Information						
APPLICANT IS RESPONSIBLE FOR THE PAYMENT OF ALL FEES AND CHARGES APPLICABLE TO THIS APPLICATION AND MUST PROVIDE THE FOLLOWING INFORMATION:						
NAME			ADDRESS			
CITY	STATE	ZIP CODE	TELEPHONE NUMBER (include area code)			
FEDERAL EMPLOYER ID NUMBER (or reason for exemption)						
I HEREBY CERTIFY THAT THE PROPOSED WORK IS AUTHORIZED BY THE OWNER OF RECORD AND THAT I HAVE BEEN AUTHORIZED BY THE OWNER TO MAKE THIS APPLICATION AS HIS/HER AUTHORIZED AGENT, AND WE AGREE TO CONFORM TO ALL APPLICABLE LAWS OF THE STATE OF MICHIGAN. ALL INFORMATION SUBMITTED ON THIS APPLICATION IS ACCURATE TO THE BEST OF MY KNOWLEDGE.						
Section 23a of the State Construction Code Act of 1972, 1972 PA 230, MCL 125.1523a, prohibits a person from conspiring to circumvent the licensing requirements of this State relating to persons who are to perform work on a residential building or a residential structure. Violators of Section 23a are subjected to civil fines.						
Signature of Applicant						
Building Permit Fee Enclosed						
(The first \$75.00 of an application is Non-refundable) \$ _____ (included \$50.00 Certificate of Occupancy fee)						
VII. Local Governmental Agency to Complete This Section						
ENVIRONMENTAL CONTROL APPROVALS						
	<u>Required?</u>		<u>Approved</u>	<u>Date</u>	<u>Number</u>	<u>By</u>
	Yes	No				
A – Zoning	Yes	No				
B – Fire Dept.	Yes	No				
C – Pollution Control	Yes	No				
D – Noise Control	Yes	No				
E – Soil Erosion	Yes	No				
F – Flood Zone	Yes	No				
G – Water Supply	Yes	No				
H – Septic System	Yes	No				
I – Variance Granted	Yes	No				
J – Other	Yes	No				
VIII. Validation – For Department Use Only						
Use Group _____			Application Fee (non-refundable _____			
Type of Construction _____			Number of Inspections _____			
Square Feet _____						
Approval Signature						
Title				Date		

IX. Site or Plot Plan – For Applicant use



Office Use Only

Expiration of Permit: A permit remains valid as long as work is progressing and inspections are requested and conducted. A permit shall become invalid if the authorized work is not commenced within 180 days after issuance of the permit or if the authorized work is suspended or abandoned for a period of 180 days after the time of commencing the work. **A PERMIT WILL BE CLOSED WHEN NO INSPECTIONS ARE REQUESTED AND CONDUCTED WITHIN 180 DAYS OF THE DATE OF ISSUANCE OR THE DATE OF A PREVIOUS INSPECTION. CLOSED PERMITS CANNOT BE REFUNDED. THE CHARGE TO RE-OPEN A CLOSED PERMIT IS \$75.00**



**BUREAU OF CONSTRUCTION CODES
PERMIT AND INSPECTION FEE SCHEDULE**

**ESTABLISHED UNDER THE STILLE-DEROSSETT-HALE
STATE CONSTRUCTION CODE
ACT, 1972 PA 230, MCL 125.1501 ET SEQ.**

BUILDING PERMIT FEE SCHEDULE

The total cost of improvement based on the Bureau of Construction Codes Square Foot Construction Cost Table. Plan review fees for use groups R-3 and R-4 only are included in this computation. Premanufactured unit fees are based upon 50% of the normal in-site construction permit fee. The first \$75.00 of an application fee is non-refundable.

to \$1,000 (includes one inspection only).....	\$75.00
\$1,000 to \$10,000.....	75.00 plus \$10 per \$1,000 over \$1,000
\$10,001 to \$100,000.....	\$165.00 plus \$3 per \$1,000 over \$10,000
\$100,000 to \$500,000.....	\$435.00 plus \$2 per \$1,000 over \$100,000
\$500,000 plus.....	\$1,235.00 plus \$3 per \$1,000 over \$500,000

All work not involving a square foot computation:

Plan review and administration base fee\$100.00
plus \$100.00 for each inspection (fee includes one inspection)

Additional inspections per hour or fraction thereof.....\$100.00

Special inspection (pertaining to sale of building).....\$100.00

Demolition:

Plan review and administration base fee.....\$100.00
plus \$0.07 per square foot on demolition

Starting Work Without Permit.....\$100.00

Temporary Certificate of Occupancy\$150.00

Certificate of Occupancy.....\$50.00

**Approved by Construction Code Commission- January 6, 2010
Established by Director, Department of Energy
Labor & Economic Growth- January 15, 2010
Effective Date May 1, 2013**

BUREAU OF CONSTRUCTION CODES
SQUARE FOOT CONSTRUCTION COST TABLE

To be used with the Bureau of Construction Codes Building Permit and Plan Review Fee Schedules for computation of the "Total Cost of Improvement". The table below outlines the base cost per square foot of any given Use Group/Type of Construction combination. Unfinished basements must be computed separately at 20% of table cost. These figures are not intended to reflect actual cost of construction, but are only used as a basis for determination of fees related to services rendered for projects.

Use Group (2009 Michigan Building Code)		Type of Construction								
		1A	1B	IIA	IIB	IIIA	IIIB	IV	VA	VB
A-1	Assembly, theaters, with stage	176.44	169.93	165.20	157.56	146.98	142.20	151.76	132.98	127.07
A-2	Assembly, nightclubs, restaurants, bars, banquet halls	151.03	146.72	141.70	136.83	127.57	124.97	131.74	115.44	113.02
A-3	Assembly, religious worship buildings, general, community halls, libraries, museums	178.16	171.65	166.92	159.28	148.82	144.24	153.47	134.83	128.91
A-4	Assembly, arenas	175.54	169.03	163.40	156.66	145.18	141.50	150.86	131.18	126.17
A-5	Assembly, bleachers, grandstands, stadiums	156.59	150.08	144.45	137.72	125.75	122.53	131.91	112.21	107.20
B	Business	155.28	149.60	144.52	137.45	124.67	120.03	131.78	109.55	104.34
E	Educational	163.53	157.90	153.20	146.21	136.19	128.91	141.11	118.49	114.47
F-1	Factory and industrial, moderate hazard	92.97	88.61	83.30	80.08	71.35	68.29	76.52	58.88	55.23
F-2	Factory and industrial, low hazard	92.07	87.71	83.30	79.18	71.35	67.39	75.62	58.88	54.33
H-1	High Hazard, explosives	87.11	82.75	78.34	74.22	66.57	62.61	70.66	54.10	N.P.
H2,3,4	High Hazard	87.11	82.75	78.34	74.22	66.57	62.61	70.66	54.10	49.55
H-5	HPM	155.28	149.60	144.52	137.45	124.67	120.03	131.78	109.55	104.34
I-1	Institutional, supervised environment	154.20	148.79	144.63	138.36	127.07	123.71	134.85	114.01	109.95
I-2	Institutional, hospitals, nursing homes	263.67	257.99	252.91	245.84	232.14	N.P.	240.17	217.03	N.P.
I-3	Institutional, restrained	176.87	171.19	166.11	159.04	147.61	142.08	153.37	132.50	125.48
I-4	Institutional, day care facilities	152.40	148.79	144.63	138.36	127.07	123.71	134.85	114.01	109.95
M	Mercantile	113.22	108.91	103.89	99.02	90.41	87.80	93.93	78.28	75.86
R-1	Residential, hotels and motels	155.54	150.13	145.97	139.70	128.56	125.20	136.34	115.49	111.44
R-2	Residential, multiple family including dormitories, convents, monasteries	130.40	124.99	120.83	114.56	104.04	100.68	111.82	90.97	86.92
R-3	Residential, one- and two-family	122.74	119.39	116.36	113.47	108.94	106.23	109.87	101.79	95.34
R-4	Residential, care/assisted living facilities	154.20	148.79	144.63	138.36	127.07	123.71	134.85	114.01	109.95
S-1	Storage, moderate hazard	86.21	81.85	76.54	73.32	64.77	61.71	69.76	52.30	48.65
S-2	Storage, low hazard	85.31	80.95	76.54	72.42	64.77	60.81	68.86	52.30	47.75
U	Utility, miscellaneous	64.61	61.02	57.11	53.93	48.40	45.26	51.34	37.85	35.85

Instructions for Application for Plan Examination

Facility Information: Provide all requested information.

Submittal: Indicate what is being submitted. The project number is critical when linking addenda and bulletins with a previous submittal for the same project.

Building Date: Provide all requested information. The building use, construction type and number of occupants shall be as prescribed by the building code.

Plan Review Request: Mark all plan reviews desired or required.

Project Architect/Engineer: Provide all requested information.

Applicant: Provide all requested information with an original signature. All correspondence will be sent to this address, and this entity will be responsible for all fees.

Required Submittals for Plan Review

For each facility, submit completed application, \$125.00 (the first \$100.00 of an application is non-refundable) deposit fee make payable to the City of Adrian and two (2) sets of plans and/or specifications with **original seals and signatures** in accordance with 1980 PA 299. Fire sprinkler shop drawings and computation are not required to be sealed by a design professional.

Building Code: Site plan, foundation plan, soil bearing capacity, floor plans, building elevation, building sections, framing plans, details, roof plan, roof finish schedule, door schedule, roof live and dead loads.

Electrical Code: Plans for all electrical systems using more than six (6) circuits, except one and two-family dwellings shall include lighting layout, circuiting, switching, conductor, and raceway sizes, wattage schedule, service location, and riser diagram, load calculations, appropriate plans showing standard symbols of all electrical equipment.

Mechanical Code: Plans indicating heating equipment, air conditioning equipment, ductwork material and layout, fire dampers, ventilation of rooms and area, location of chimneys and vents, piping layouts.

Plumbing Code: Site plan, floor plans DMW riser diagrams and water distribution system and roof plan. Show direction of flow, pipe sizes, grade of horizontal piping, elevations, drainage fixture unit loading of both stacks and drains in the DWV system. Supply fixture unit load for the water system, branch supplies serving more than one (1) plumbing fixture, appliance or hose outlet.

Energy Code: Floor plans, building sections, details, average annual degree days, exterior envelope component materials, "U" values of elements, "R" values of insulating materials, size and type of apparatus and equipment, energy calculations.

Upon Receipt of All Application

Written confirmation will be sent to the applicant. Further correspondence, concerning the request plan review, will be sent to the applicant and the project architect/engineer, if one is provided.

Office Use Only
Paid
Permit #

City of Adrian
Construction Code Services
135 East Maumee Street, Adrian, Mi 49221
Ph. 517-264-4814 – Fax 517-264-8016
Download applications at www.ci.adrian.mi.us

Deposit Fee: \$125.00 (the first \$100.00 of an application is non-refundable)

Authority:	19072 PA 230	
Completion:	Voluntary	DELEG is an equal opportunity employer/program. Auxiliary aids, services and other reasonable accommodations are available upon request to individuals with disabilities.
Penalty:	Plans will not be reviewed	

Note: The applicant is responsible for all fees applicable to this application.

Facility Information				
Facility Name		Street / Site Address		
Name of City, Village or Township in which Facility is located				County
<input type="checkbox"/> City	<input type="checkbox"/> Village	<input type="checkbox"/> Township	Of:	
Submittal				
<input type="checkbox"/> Addendum No. _____ <input type="checkbox"/> Bulletin No. _____ <input type="checkbox"/> Original Project No. _____				
Building Data				
Gross Floor Area				
<input type="checkbox"/> New Building _____ <input type="checkbox"/> Addition _____ <input type="checkbox"/> Alteration _____ <input type="checkbox"/> Repair _____				
Classification per Building Code				
Building Use _____ Construction Type _____ No. of Occupants _____ Area/Floor _____ No. of Floors _____				
Fire Sprinklers				
<input type="checkbox"/> Entire Building <input type="checkbox"/> Limited Area _____ <input type="checkbox"/> None				
<input type="checkbox"/> Public School or Government Project is less than \$15,000		Project Description _____		
Plan Review Request				
<input type="checkbox"/> Building <input type="checkbox"/> Electrical <input type="checkbox"/> Mechanical <input type="checkbox"/> Plumbing <input type="checkbox"/> Other _____				
<input type="checkbox"/> Barrier Free <input type="checkbox"/> Footing/Foundation <input type="checkbox"/> Fire Sprinkler <input type="checkbox"/> Energy				
Building Owner				
Name (Company or Individual)		Contact Person		Telephone Number (Include Area code)
Address	City	State	Zip Code	Fax Number (Include Area Code)
Project Architect / Engineer				
Name of Company		Licensed Individual		Michigan License Number
Address	City	State	Zip Code	Telephone Number (Include Area Code)
Applicant (Note: All correspondence will be sent to this address)				
Name of Company		Applicant Name		Fein or SS No. *(Required)
Address	City	State	Zip Code	Telephone Number (Include Area Code)
E-Mail Address				Fax Number (Include Area Code)
Applicant Signature (Must be an original signature)			Date	
*This information is confidential. Disclosure of confidential information is protected by the Federal Privacy Act.				

Paid _____
Permit No. _____

City of Adrian
Construction Code Services
135 E. Maumee Street
Adrian, MI 49221
Ph 517.264.4814 Fax 517.264.8016
Download application at www.ci.adrain.mi.us

PLAN REVIEW FEE SCHEDULE

Building Code Review Fee

BUILDING VALUATION*

\$0-\$500,000.....0.0013 of building valuation but not less than \$100.00

Over \$500,000.....\$650.00 plus 0.0003 of building valuation over \$500,000

*Based on Bureau of Construction Codes square foot construction cost table.

The first \$100.00 of an application is non-refundable.

Mechanical, Plumbing, Electrical (each code) ...25% of Building Code Review Fee

Barrier Free Design, Energy (if separate reviews) 25% of Building Code Review Fee

Review of Alterations, Remodeling & Submission where
NO SQUARE FOOTAGE CALCULATIONS
are not available.....\$125.00 Per Hour - **1 Hour Minimum

Consulting Services.....\$125.00 Per Hour- **1 Hour Minimum

**Hourly rate is billed to the nearest half hour.

Note: Plan review services for permit issued by the City of Adrian will be assessed at 30% of the building permit fee.

Approved by Construction Code Commission – January 6, 2010
Established by Director, Department of Energy
Labor & Economic Growth- January 15, 2010
Effective Date- April 1, 2010

How to Determine the Cost of the Permit

HOUSE:

1. You will need the total square footage of the building including attached garage.

Example: 1000 Sq. Ft. 1st floor
 500 Sq. Ft. 2nd floor
 400 Sq. Ft. Garage
 19000 Total Sq. Ft.

Include basement (if finished) in the above square footage. If basement is unfinished, take 20% of square footage.

Unfinished Basement: 1000 sq. ft.
 x .20
 200 sq. ft.

 1900
 +200
 2100 sq. ft.

2. Use square footage of construction cost table to determine value of construction.

Use group R3 1 & 2 family dwellings
Type of construction VB Wood Frame Construction= \$76.46
Per square feet.

 2100 sq. ft.
 x \$76.46
 \$160,566.00

3. Take value of construction and use it with building permit fee schedule.

For \$160,566.00, use \$100,000 - \$5000,000 formula

First 100,000 = \$435.00

Reminder \$60,566.00 @ \$2.00 per every \$1,000

 60.56
 x 2.00
 \$121.12

 \$435.00
 +121.00
 \$556.00
 + 50.00 (Certificate of Occupancy)

\$606.00 (Permit Fee)

Premanufactured homes are based on 50% of on-site construction value for house. All other construction will figured as on-site construction.

Example: 2000 sq ft Modular Home

Use 1000 sq ft (50% if construction value for house)

Add Garage 400 sq ft

Add Basement 400 sq ft

(Unfinished)

2000

x .20 1800 sq ft

x 76.46

\$137,628.00

First 1000,000 sq ft = \$435.00

(37,63 @ \$2.00 per ft) 75.00

\$510.00

\$50.00 Certificate of Occupancy

\$560.00 Total Cost

